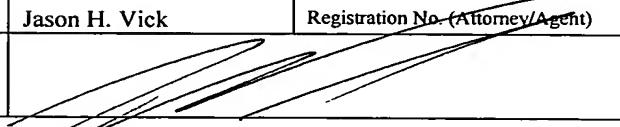
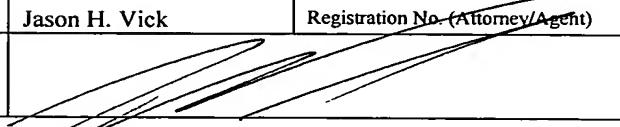
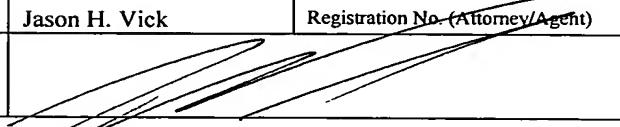


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Approved for use through 10/31/2002, OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>		Attorney Docket No. T3653-8881US02 First Inventor Marcos C. TZANNES Title A SYSTEM AND METHOD FOR TRANSMITTING MESSAGES BETWEEN TRANSCIEVERS USING ELECTROMAGNETICALLY COUPLED SIGNALS Express Mail Label No. _____																																		
APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>		ADDRESS TO: Commissioner for Patents Mail Stop: Patent Application P.O. Box 1450 Alexandria, VA 22313-1450																																		
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27.</i> 3. <input checked="" type="checkbox"/> Specification [Total Pages 20] <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications <i>(if applicable)</i> - Statement Regarding Fed sponsored R & D <i>(if applicable)</i> - Reference to sequence listing, a table, or a computer program listing appendix <i>(if applicable)</i> - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 4] 5. Oath or Declaration [Total Page 2] <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b) 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <ul style="list-style-type: none"> <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) Prior application information: Examiner <u>Pathak, Sudhanshu C.</u> of prior application No.: <u>09/616,954</u> For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.																																				
ACCOMPANYING APPLICATION PARTS <ul style="list-style-type: none"> 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Nonpublication request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other: _____ 																																				
19. CORRESPONDENCE ADDRESS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; padding: 5px;"><input checked="" type="checkbox"/> Customer Number or Bar Code Label</td> <td style="width: 33%; padding: 5px; text-align: center;">000181</td> <td style="width: 33%; padding: 5px; text-align: right;">or <input checked="" type="checkbox"/> Correspondence address below</td> </tr> <tr> <td>Name</td> <td colspan="2">MILES & STOCKBRIDE P.C.</td> </tr> <tr> <td>Address</td> <td colspan="2">1751 Pinnacle Drive Suite 500</td> </tr> <tr> <td>City</td> <td>McLean</td> <td>State</td> <td>VA</td> <td>Zip Code</td> <td>22102-3833</td> </tr> <tr> <td>Country</td> <td>USA</td> <td>Telephone</td> <td>703-903-9000</td> <td>Fax</td> <td>703-610-8686</td> </tr> <tr> <td>Name (Print/Type)</td> <td colspan="3">Jason H. Vick</td> <td>Registration No. (Attorney/Agent)</td> <td>45,285</td> </tr> <tr> <td>Signature</td> <td colspan="3">  </td> <td>Date</td> <td>December 24, 2003</td> </tr> </table>				<input checked="" type="checkbox"/> Customer Number or Bar Code Label	000181	or <input checked="" type="checkbox"/> Correspondence address below	Name	MILES & STOCKBRIDE P.C.		Address	1751 Pinnacle Drive Suite 500		City	McLean	State	VA	Zip Code	22102-3833	Country	USA	Telephone	703-903-9000	Fax	703-610-8686	Name (Print/Type)	Jason H. Vick			Registration No. (Attorney/Agent)	45,285	Signature				Date	December 24, 2003
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